

# Missouri Assessment Program Quality Assurance Questionnaire Spring 2003

Region: \_\_\_\_\_

Date of Visit: \_\_\_\_\_

District Name: \_\_\_\_\_  
Name: \_\_\_\_\_

Regional Facilitator: \_\_\_\_\_

County/District/Building Code: \_\_\_\_\_

Building Name: \_\_\_\_\_  
Title: \_\_\_\_\_

## I. Receipt/Storage of Materials

1. May I see a copy of your district assessment plan?
2. Who is responsible for receiving and assuring security of test materials?
3. Where are test booklets stored upon receipt in the district? \_\_\_\_\_  
In the building? \_\_\_\_\_
4. When are test-booklet seals broken and tests delivered to teachers?
5. If the district is a carbonless paper district, ask to see the sealed envelope.

## II. Preparation for and Administration of MAP

1. Date examiner's manuals were distributed? To Building \_\_\_\_\_ To Examiner \_\_\_\_\_
2. Where and when did teacher training with examiner's manual occur?
3. Where are test booklets stored overnight/between sessions during the administration of the test?
4. Who oversees accommodations for students with special needs and test security in the preparation of materials for students with disabilities?

5. Who is responsible for the security of the scoring guides provided for student responses retained through the use of carbonless paper at the intermediate and high-school levels?
6. When was the last time the district testing coordinator attended a DESE-sponsored TCM/EM meeting?

### **III. Collection and Return of Test Materials**

1. Who collects test booklets to prepare for return of materials to CTB?
2. Who is responsible for checking test booklets, etc., to ensure that all booklets are accounted for and returned?
3. After the test, where are test materials stored until they are returned?
4. Who is responsible for the mailing of materials to CTB?
5. How are make-ups planned and undertaken?
6. After the MAP test is over, how do you plan to use the carbonless paper?
7. Other comments:

# Missouri Assessment Program Quality Assurance Observation Spring 2003

Region: \_\_\_\_\_

Date of Visit: \_\_\_\_\_

District Name: \_\_\_\_\_

Examiner: \_\_\_\_\_

Grade Level: \_\_\_\_\_

\_\_\_\_\_

Regional Facilitator: \_\_\_\_\_

County/District/Building Code: \_\_\_\_\_

Building Name: \_\_\_\_\_

Title: \_\_\_\_\_

Content Area: \_\_\_\_\_

1. Did students appear prepared for the test? ☐ Yes ☐ No.

Comments:

2. Were the tests kept in a secure area prior to being given to the students? ☐ Yes ☐ No

Comments:

3. Teacher follows script and directions. ☐ Yes ☐ No.

4. Monitoring of testing situation.

- Do the students appear to be on task? ☐ Yes ☐ No.
- Are any testing aids on the classroom walls? ☐ Yes ☐ No.
- Did the proctors paraphrase the test questions? ☐ Yes ☐ No.
- Did the proctors encourage students to change answers? ☐ Yes ☐ No.
- Number of proctors in the room (ratio of proctors to students)? \_\_\_\_\_
- What kinds of problems, if any, were observed?
- Other

5. Note any accommodations/modifications observed.

6. Where does the teacher secure test booklets after testing is finished?

7. Additional time offered as needed on section 1—How much? \_\_\_\_\_  
and on section 2—How much? \_\_\_\_\_

8. Other concerns:

### **Examiner Interview:**

1. Have you seen your district's assessment plan? ☐ Yes ☐ No  
Tell me about it.

2. Do you have any concerns regarding the handling or administration of the tests?  
☐ Yes ☐ No  
Explain.

3. Have you given your students practice tests?  
☐ Yes ☐ No  
Explain.

Who developed the practice tests? \_\_\_\_\_  
May I see one?

4. Which materials published by DESE do you use to prepare your students for the MAP?  
Explain.

Do you use other materials? ☐ Yes ☐ No  
Explain.

5. Do you use the results of the MAP or other tests in your classroom?  
☐ Yes ☐ No  
Explain.

6. Are MAP ClearAccess reports for the grade level/subject area you teach shared with you?  
☐ Yes ☐ No  
Explain.

7. Other comments: